#### IN CONCLUSION

It has not been my aim to bring the history of embryology up to our day. So much has been accomplished in the last two generations that the review of this portion alone would be a considerable task and also one full of pitfalls. Although we know the history of the development of only a relatively few forms thoroughly, no one can encompass the entire field of embryology at present. Nor was it my aim to give the complete history of early embryology even. For that America lacks some of the indispensable literature.

I used the essay form because it permits greater freedom and have followed the chronological order in the main, but confined myself almost entirely to vertebrate embryology. I took little account of the philosophers and metaphysicians. There was enough speculation among naturalists, and the history of embryology shows that speculations regarding development approximated the truth inversely in proportion to their elaborateness. Observation and experiment always have accomplished more.

Imagination never has been able to fill gaps in our knowledge and has proven an unsafe guide. Narrowing the wide horizon of the unknown has been and can be accomplished only through observation and experiment. Although ultimate causes have eluded us, it often has been possible to learn something about how things happened even if not why they happened, and this probably will long remain true.

I have tried to convey something of the spirit of the older investigators by permitting them to speak for themselves. This could be accomplished only by quotations. Except for minor changes and some additions, these essays represent a series of lectures given for a half a decade, as an introduction to mammalian embryology. Many other topics could, hence, have been chosen and those considered could have been dealt with at greater length. I have deliberately avoided making a detailed analysis of the contribution of different investigators, for this could not be done without the introduction of many details of interest to the specialist only, and these essays are not intended for him.\*

Department of Anatomy, Stanford University.

(The end)

The First Appendectomy.—Prof. Hermann Kümmell, surgeon of Hamburg, celebrated his eightieth birthday May 22. Kümmell was the first surgeon in Germany to perform the well known appendix operation (in 1889). He likewise pointed out ways for the elimination of cancer, for combating tuberculosis, and for the recognition of unobserved injuries of the spinal column. His researches have aided also in the spread of antisepsis and asepsis. He devoted himself primarily to surgery of the abdominal cavity and to disorders of the kidneys and of the urinary system. The handbook of surgery published by Kümmell in collaboration with Bier and Braun is known the world over.—Journal of American Medical Association, Vol. 99, No. 3.

### SOME MEDICAL EXPERIENCES IN PERSIA

BEING A COMPILATION OF LETTERS FROM THE LATE JOSEPH W. COOK, M.D.

LETTER II\*

A TRIP TO NEHAVEND IN LOORISTAN
Written at Hamadan, Persia,
The American Hospital.

T is interesting that in Persia every city or district is known for a certain characteristic. Isfahan, they say, is noted for the ability of its inhabitants to pull the wool over the eyes of prospective purchasers. Thus, Nehavend, where as I have said we went in May, is notorious for its miserliness. It is a city of some 16,000, of whom 1000 to 2000 are Jews. Nehavend is extremely rich in opium and tobacco, the opium in great demand for its high morphin content. But I never saw such terrible poverty; even the wealthy look poor and I saw no fine homes; the wealthy seem not to be willing to spend their money nor to know how to enjoy it. The city's curse is opium; 90 per cent of the population is addicted to it, they say, and without overstatement I fear; certainly the majority of my patients acknowledged their use of it. I did seven cataract operations, one iridectomy, fifteen hemorrhoid injections, twentyfive intravenous injections of typhoid vaccine for various conditions, fifteen neosalvarsan injections, two cauterizations for corneal ulcers, fifteen private calls, and saw 1933 patients during that week. It was very difficult to keep one's equilibrium. At 7 a. m. the sick would begin to come; scores of well-to-do were turned away for refusal to pay the examination fee; at the same time literally hundreds of poor people were seen and treated. Never have I seen such filth and such rags and such poverty, but behind them all I could see good faces and even some beauty. The women were interesting, rather longish faces, brown hair, grayblue eyes, good features. But about 80 per cent had bad eyes, mostly trachoma so bad as to require weeks of persistent treatment to effect any sort of improvement. Fully 60 per cent had malaria or its effect; very few had anything that I could really help, but oh, the frantic passion to be examined and, as they hoped, cured! The crowd milled around the door, actually fighting for a chance to come in. It was hard, in such confusion, to make proper examinations. Suppose you had several children with chills and fever, or very bad eyes, no money to buy medicines even if you knew what to use; or suppose you had lost eight or ten children unborn and knew you would be thrust out by your husband, or perhaps had never had a baby and had already been thrown out by several husbands; or your husband was sick, even dying, and no one able to help; or you as a father were sick, unable to work, and four or five children starving?

 $<sup>\</sup>mbox{*}$  Editor's Note: Complete list of references will appear in the reprints.

<sup>\*</sup> Letter I of this paper was printed in the September issue of California and Western Medicine, page 187.

One day a poor boy of fifteen came, suffering from painful swollen bones, the cause of which was uncertain. I decided to give him an injection of neo-salvarsan and told him to come in the morning. He mentioned that he had a blind and crippled grandmother. I had him wait, and after the dispensary walked with him to his home, on the way passing over the cavern where, twenty years before, a rich treasure of royal goods was found. His house was close to the ruined citadel where Yezddegird had lived in all his splendor before Omar overran Persia some 1300 years ago. The ground floor was used for donkeys, cows, and sheep; the second floor for one-room apartments; and up in one corner was a third story with a narrow porch; in a small room I found a poor, old, crippled woman, blind in both eyes; one had a none too hopeful cataract. I told the boy to bring her the next morning. On the way back I found an old man begging; I stooped to look at his eyes and found a beautiful cataract; I begged him to come and let me operate on him. "No, no!" he cried out, "I've tried it and—no good. My other eye was operated on and ruined, and I suffered too much." Some two or three days later he appeared; but when told he would have to have a friend to care for him a few days, he said it was impossible, as he had no friend, and no place but a bath or hammam in which to stay.

A mother brought her baby of  $1\frac{1}{2}$  years, pale and anemic; she said that it had been very sick ever since the cat had eaten the baby's hand off. It seemed that about a year before a cat or wildcat had killed two or three children within the city, had eaten the arm of one and the hand of this baby.

A man showed me his face, with a patch of paper over the root of the nose. There was a bad scar down the side; the patch covered two holes into the ethmoid sinuses, opening right into the skull. A year before, in the mountains of Looristan, a big bear had embraced him and bitten his nose, just missing his eyes. How he got free I cannot understand.

Not a day passed but two or three of the four leading local doctors, all Jews as usual, sat with us as we examined and prescribed. In all my trips I have never found such good doctors, men so anxious to learn. I took every occasion to reassure the people that they were lucky to have such good doctors.

One evening I was recommending the very latest Boston treatment for sterility by use of duq, the Persian substitute for Bulgarian bacillus culture, when one of the doctors said: "Isn't it curious that among the Loors whenever mares are sterile they use this same treatment, with almost universal success?" I confess I was surprised, and wondered whether the Boston specialist had got his idea by chance from our Loorish friends.

Nearly all the well-to-do suffered from the usual Persian malady of bavasir or hemorrhoids,

for which I find the injection of phenol in glycerine almost miraculous in its curative properties. In any case it makes for us many friends because of its simplicity. One day three big, green-turbaned men, all descendants of the Prophet, were sitting in the dispensary, all suffering from this complaint. Waiting for the instruments to boil, I ventured to remark, in reply to a statement that one had made, that this work was of God and was just such work as Jesus had approved, and that the passage in the New Testament that appealed to me most was, "Inasmuch as ye have done it unto one of the least of these, my brethren, ye have done it unto me." They all agreed. The leader, Haji Agha Yeddullah, hesitated, however, to acknowledge that God could live in us, but admitted that this Spirit was something we couldn't understand. I asked them why they did not start some such dispensary work in connection with their mosques. The reply was rather vague.

After seeing 1933 patients in less than a week, overwhelmed and exhausted, I returned to my family in Hamadan.

Sincerely yours,

JOSEPH W. COOK.
(To be concluded)

## CLINICAL NOTES AND CASE REPORTS

# CHORION EPITHELIOMA IN PATIENT SEVENTY YEARS OF AGE\*

REPORT OF CASE

By WILLIAM R. DORR, M. D.
AND
ORAN I. CUTLER, M. D.
Loma Linda

IT has been observed a number of times that chorion epithelioma may occur in women fifty years of age, but the majority of cases are found in patients considerably younger. While the condition undoubtedly is infrequent in patients as old as seventy years of age, it probably is of some practical importance to call attention to the fact that such a case has been seen.

## REPORT OF CASE

Mrs. E. J. C., age seventy, a widow, entered the Riverside County Hospital on August 21, 1930, complaining of a bloody vaginal discharge of two months' duration, with some pain in lower left quadrant extending down into the leg. She also complained of indigestion and cough with some sputum.

The general physical examination was negative except some moist râles in chest and an enlargement of the uterus to about the size of a medium-sized orange. The blood pressure was 168/86. The urine

<sup>\*</sup> From the Riverside County Hospital and the Pathology Department of the College of Medical Evangelists.